		•		٠.		•						Appn	OVed for	Iron fi	 haniint zanau	 P	TO/88/06 (	124
-	L Under the Pape	ATEN	duction A	UCAT	FION F	EE D	ETERMIN	espe A1	ond (	U.S. Pale 9 II COTICO N REC	nt and on of the DRD		uk Offic in unles	BRU	hrough 7/31/2 DEPARTMI plays a valid lication or Do	ENT OM	OMB 0661 OF COMME	-00 IRO
		APPL		BA NG	FILED .		m PTO-876	_		•			<u>-</u>	10	1677	0	00	
ŀ		<del></del>	(Column 1)			(Column 2)			<del>.</del>	SMALL ENTITY			<u> </u>	OR	OTHER THAN SMALL ENTITY			
	FOR BASIC FEE		NUMBER F		LED N		UMBER EXTRA		4	RATE	(\$)	FEE (			RATE (			
1 8	D7 CFR 1.18(a), (b), or (c)) SEARCH FEE		-			<del> </del>			4							7.51	<u>ا۔</u> ا	
lε	37 CFR.1.16(A), (1), (2)	E	<del></del>				<del>· · · · · · · · · · · · · · · · · · · </del>		4	<u></u>						•		_
٠,	37 CFR 1.16(0), (p), OTAL CLAIMS	or (q)) .	1.11				· · ·		╣.	<u> </u>		·				i		_
(3) CFR 1.16(1)) INDEPENDENT CLAIMS		AIMS	_ <u></u>	^	us 20 a	•	· 		4	x.	÷			OR .	× 18	-	<del></del>	_
(37 CFR 1.16(h))			If the sp	ecificat	is 3 =	drawine	s exceed 10		ر ا	<u>*</u>	-	<u> </u>	_		× 84	_		-
APPLICATION SIZE FEE			is \$250 (\$125 for small			dication size fee due		е	П							7		7
	(37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							e .	П	•		٠	1	- 1	-0 - A	-1		1
MI	MULTIPLE DEPENDENT CLAIM PRESENT OF CFR 1.16(1)									<del></del>	$\dashv$	<del></del>	1	ŀ	<u>Q50</u>	+	<del></del>	4
" If the difference in column 1 is less than zero, enter "" in column 2.									TOTAL	1		$\dashv$	.r	<u>W81)</u>	+,	760	-{	
APPLICATION AS AMENDED - PART II									•		_		_!		TOTAL	L	750	1
	7-014	<b>16</b>	m 1)	٠.		kemn 2)	(Column 3	13					_	ıR	OTHE	ό τι		
~			AIMS AINING		HIGHEST NUMBER		PRESENT		Γ	SMALL E			ר `	<u>`</u> _	SMALL	ĒΝ	TITY	l
MENDMENT /			TER DMENT		PREVI	OUSLY FOR				·RATE (\$)	1 1	ADDI- FIONAL FEE (\$)			RATE (\$)	ŀ	ADDI: TIONAL	
	Total G1 CPR LIGHT	7 CFR (,iegh		Minus - O		0 -			Ŀ	(			OR	1.	$\overline{\tilde{\Omega}}$	-	FEE (1)	
	(17 CFR 1,160\)	5000		Minus	1	3	-		×				OR		207) =	(		
₹	Application Size Fee (37 CFR 1.16(3))  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. (37.0FR 1.16(1))							+	$\vdash$		+-	<del></del>	-					
						. (31,0	- K 1,10(j)	J		OTAL	╁┈		OR	پا	360			
		(Colum	n ()		(Celu	mn 2)	<b>*********</b>		A	DD'L FEE			OR		O'L FEE	_	200	
٦	8/1	REMAR	us I		HIGHE	EST	(Column 3)	7	Γ.	ATE O	Т.	<u> </u>	1					
إ		AFTE	MENT		PREVIO PAID F	USLY	EXTRA		Ι΄	CATE (\$)	Te	DDI: DNAL E (\$)		"	SATE (\$)	TI	ONAL	
\$	Total O7 CFR 1.9(0)	· /		Minus	* QX	2	2		x		<u> </u>		OR.	1	5		壬(4)	
į	Application Circ.			Minus	<u></u>	3_1	=		··×				OR:	2	元 1	$\vdash$	)	
Application Size Fee (37 CFR 1.16(s))												<u> </u>		<del>`</del>				

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)

If the entry in column 1 is less than the entry in column 2, write '0' in column 3.

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'.

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '3'.

The 'Highest Number Previously Paid For' (Total or Independent) is the fighest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to fite (and by the including galleding, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL ADD'L FEE

OR

uR.

ADD'L FEE